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DOCKET NO.: 4085-226-27

ASSISTANT COMMISSIONER FOR PATENTS  
PO BOX 1450  
ALEXANDRIA, VA 22313-1450

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JUN 20 2003

TECH CENTER 1600/2900

Re: Serial No.: 09/654,499  
Applicant(s): Michelle A.J. PALMER et al.  
Filing Date: September 1, 2000  
For: RECEPTOR FUNCTION ASSAY FOR G-PROTEIN COUPLED  
RECEPTORS AND ORPHAN RECEPTORS BY REPORTER ENZYME  
MUTANT COMPLEMENTATION  
Group Art Unit: 1646  
Examiner: John D. Ulm

SIR:

Attached hereto for filing are the following papers:

**FEE TRANSMITTAL  
REQUEST FOR EXTENSION OF TIME (ONE MONTH)  
RESPONSE TO OFFICE COMMUNICATION AND  
PRELIMINARY AMENDMENT, INCLUDING ATTACHMENTS (2)  
STATEMENT UNDER 37 CFR 1.821-1.825  
SEQUENCE LISTING (PAPER COPY, 16 PAGES)  
SEQUENCE LISTING (DISKETTE)**

Our check in the amount of \$ 110.00 is attached covering any required fees. In the event any variance exists between the amount enclosed and the Patent Office charges for filing the above-noted documents, including any fees required under 37 C.F.R. 1.136 for any necessary extension of time to make the filing of the attached documents timely, please charge or credit the difference to Deposit Account No. 50-1442. Further, if these papers are not considered timely filed, then a request is hereby made under 37 C.F.R. 1.136 for the necessary extension of time. A duplicate copy of this sheet is enclosed.

Respectfully submitted,

PIPER RUDNICK LLP

Steven B. Kelber  
Attorney of Record  
Registration No.: 30,073

Christopher W. Raimund  
Registration No.: 47,258



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FCH CENTER 1600/2900

FEE TRANSMITTAL						Docket No.	4085-226-27							
						Serial No.	09/654,499							
						Filing Date	September 1, 2000							
						Inventor(s)	Michelle A.J. PALMER							
						Group Art Unit	1646							
TOTAL AMOUNT OF PAYMENT						\$110.00	Examiner	John D. Ulm						
1. <input type="checkbox"/> Applicant claims small entity status. <input checked="" type="checkbox"/> Charge any <b>UNDERPAYMENT</b> or credit any <b>OVERPAYMENT</b> in the indicated fees to Deposit Account No. 50-1442. <input type="checkbox"/> Charge the indicated fees to Deposit Account No. 50-1442.						FEE CALCULATION (continued)								
2. <input checked="" type="checkbox"/> Check enclosed.						3. ADDITIONAL FEES								
						Large Entity		Small Entity	Fee Description					
						Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Paid				
FEE CALCULATION						1051	130	2051	65	Surcharge-late filing fee or oath				
1. BASIC FILING FEE						1052	50	2052	25	Surcharge-late provisional filing fee or cover sheet				
Large Entity		Small Entity		Fee Description		1053	130	1053	130	Non-English specification				
Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Paid		1812	2520	1812	2520	Ex parte reexam. fee				
1001	750	2001	375	Utility filing fee		1251	110	2251	55	1-mo. ext. of time 110				
1002	330	2002	165	Design filing fee		1252	410	2252	205	2-mo. ext. of time				
1003	520	2003	260	Plant filing fee		1253	930	2253	465	3-mo. ext. of time				
1004	750	2004	375	Reissue filing fee		1254	1450	2254	725	4-mo. ext. of time				
1005	160	2005	80	Provisional filing fee		1255	1970	2255	985	5-mo. ext. of time				
SUBTOTAL (1)						\$0.00	1401	320	2401	160	Notice of Appeal			
2. EXTRA CLAIM FEES						1402	320	2402	160	Appeal Brief				
tot. claims		-	20*	=	0	x	\$18	=	0	1403	280	2403	140	Request for Oral Hearing
ind. claims		-	3*	=	0	x	\$84	=	0	1501	1300	2501	650	Utility/Reissue Issue Fee
<input type="checkbox"/> Multiple Dependent Claims		\$280				=				1502	470	2502	235	Design Issue Fee
Large Entity		Small Entity		Fee Description		1503	630	2503	315	Plant Issue Fee				
Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Paid		1460	130	1460	130	Petitions to the Commissioner				
1202	18	2202	9	Claims in excess of 20		1806	180	1806	180	IDS Submission				
1201	84	2201	42	Independent claims in excess of 3		8021	40	8021	40	Assignment				
1203	280	2203	140	Multiple dependent claim, if not paid		1801	750	2801	375	For Filing RCE				
1204	84	2204	42	*Reissue independent claims over original patent		1802	900	1802	900	Expedited Design				
1205	18	2205	9	*Reissue claims in excess of 20 and over original patent		OTHER (indicate below):								
SUBTOTAL (2)						\$0.00								
* or number previously paid, if greater; For Reissues, see above						SUBTOTAL (3)					\$110.00			

Name	Steven B. Kelber	Registration No.	30,073
Signature		Date	June 17, 2003
Name	Christopher W. Raimund	Telephone	202-861-3900
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